

JANUARY 2018

KMAP GENERAL BULLETIN 18020

Emergency Room Visits Billed with Non-Emergent Diagnosis

Effective January 19, 2018, and retroactive to dates of service on and after July 1, 2017, emergency room claims will no longer be reduced to procedure code 99281 based on a list of diagnosis codes. Emergency room claims must be billed appropriately, and medical records may be requested to be reviewed for coding accuracy. This applies to procedures 99282, 99283, 99284, 99285, 99291, and 99292.

Fee-for-service (FFS) claims will not be reprocessed systematically. If a claim was down-coded to procedure code 99281 and meets the criteria for medical necessity, the claim may be adjusted by the provider.

Note: The effective date of the policy is January 19, 2018, retroactive to dates of service on and after July 1, 2017. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The **KanCare Open Claims Resolution Log** on the KMAP [Bulletins](#) page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

DXC Technology is the fiscal agent of KMAP.